

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J36597

FILED
Apr 21, 2008
Secretary of State

Entity Name: INTERCHANGE FARMS, INC.

Current Principal Place of Business:

2910 GULF CITY ROAD
RUSKIN, FL 33570 US

New Principal Place of Business:

Current Mailing Address:

POST OFFICE BOX 1246
RUSKIN, FL 33575 US

New Mailing Address:

FEI Number: 59-2740281 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

COUNCIL, MICHAEL D P, D
5715 BRIGMAN AVENUE
WIMAUMA, FL 33598 US

Name and Address of New Registered Agent:

VOGT, JR., JOHN C P.A.
3710 W. IDELWILD AVE.
SUITE # 108
TAMPA, FL 33614-573 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: JOHN C. VOGT, JR., P.A.

04/21/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: SPENCER, WILLIAM H D
Address: 2926 W. HAWTHORNE ROAD
City-St-Zip: TAMPA, FL 33611 US

Title: P,D () Delete
Name: COUNCIL, MICHAEL D P,D
Address: POST OFFICE BOX 1246
City-St-Zip: RUSKIN, FL 33575 US

Title: D () Delete
Name: CURRIE, W. E D
Address: 5815 N. DALE MABRY HWY
City-St-Zip: TAMPA, FL 33614 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MICHAEL D. COUNCIL

DP

04/21/2008

Electronic Signature of Signing Officer or Director

Date